



Savitribai Phule Pune University



Examination Form Mar/Apr 2018

Form No :1044-00839

Course Name S.E.(2015 PAT.)(COMPUTER)

PRN.	71700884D	Eligibility No.	12016094180	Total Fee to be Paid:	940
PUNCODE	CEGP010440	College	(5) SCTR Pune Institute of Computer Technology		

Instructions to the Candidate:

- 1.This Exam form along with fee amount should be submitted to the concerned college .
- 2.Repeater students should attach attested true copy of the latest mark sheet alongwith this form.
- 3.This form will be considered **ONLY AFTER APPROVAL** from the concern College.

To,

Director, Board of Examinations & Evaluation, Savitribai Phule Pune University, Pune-411 007.

Sir/Madam, I request permission to present myself at the examination courses, mentioned below

1.Personal Details:

Name of the Applicant		GUPTA AYUSH NARESH	
Name of the Applicant's Mother		SEEMA	
Address for Communication		Tuscan Estate ,Building no-B2 ,Flat no-202,Kharadi Bypass Road Pune-411014	
Aadhaar Number		783957762753	
Email-ID	ayushgupta.gupta90@gmail.com	Contact Number	9028600226
Gender	Male	Category	OPEN
Is Physically Disabled	No	Medium of Instruction	English

Applied Subjects Information :

Sem	Sub Code	Subject Name	TW	INSEM/ ONLINE	TH	PR	OR
4	207003	Engineering Mathematics III	Y	Y	Y	-	-
4	210251	Computer Graphics	-	Y	Y	-	-
4	210252	Advanced Data Structures	-	Y	Y	-	-
4	210253	Microprocessor	-	Y	Y	-	-
4	210254	Principles of Programming Languages	-	Y	Y	-	-
4	210255	Computer Graphics Lab	Y	-	-	Y	-
4	210256	Advanced Data Structures Lab	Y	-	-	Y	-
4	210257	Microprocessor Lab	Y	-	-	Y	-
4	210258A	Water Management 210258A	-	Y	-	-	-



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3. Fee Details		
Fee Type	Fee Amount	Remarks
Form Fee	30	
Exam Fee	640	
Passing Certificate Fee	0	
CAP Fee	135	
Statement Of Marks Fee	135	
Project Fee/Dissertation	0	
EVS Fee	0	
Internal Marks Fee	0	
Departmental Fee	0	
Late Fee	0	
Fine Fee	0	
Total Fee to Be Paid:	940	

DECLARATION :

I hereby declare that I have gone through the Syllabus and the list of books prescribed for the examination for which I am appearing. I **SHALL BE RESPONSIBLE** for any errors and wrong or incomplete entries made by me in the Examination form.

I shall not request for special concession such as change in the time and/or day fixed for the University examination etc. on religious or any other grounds.

Yours faithfully.

Note: Special Subject(s) should be verified by the subject teacher & signed.

Please, Select Optional Subject(s) carefully, because Optional Subject(s) are not editable.

Place : _____ Date : _____

Signature of the Candidate

Place : _____ Date : _____

Stamp & Signature of the Principal